

# Africa CDC Epidemic Intelligence Report

Date of Issue: 18 Feb 2025

Active Events

82

New Events reported  
in 2025

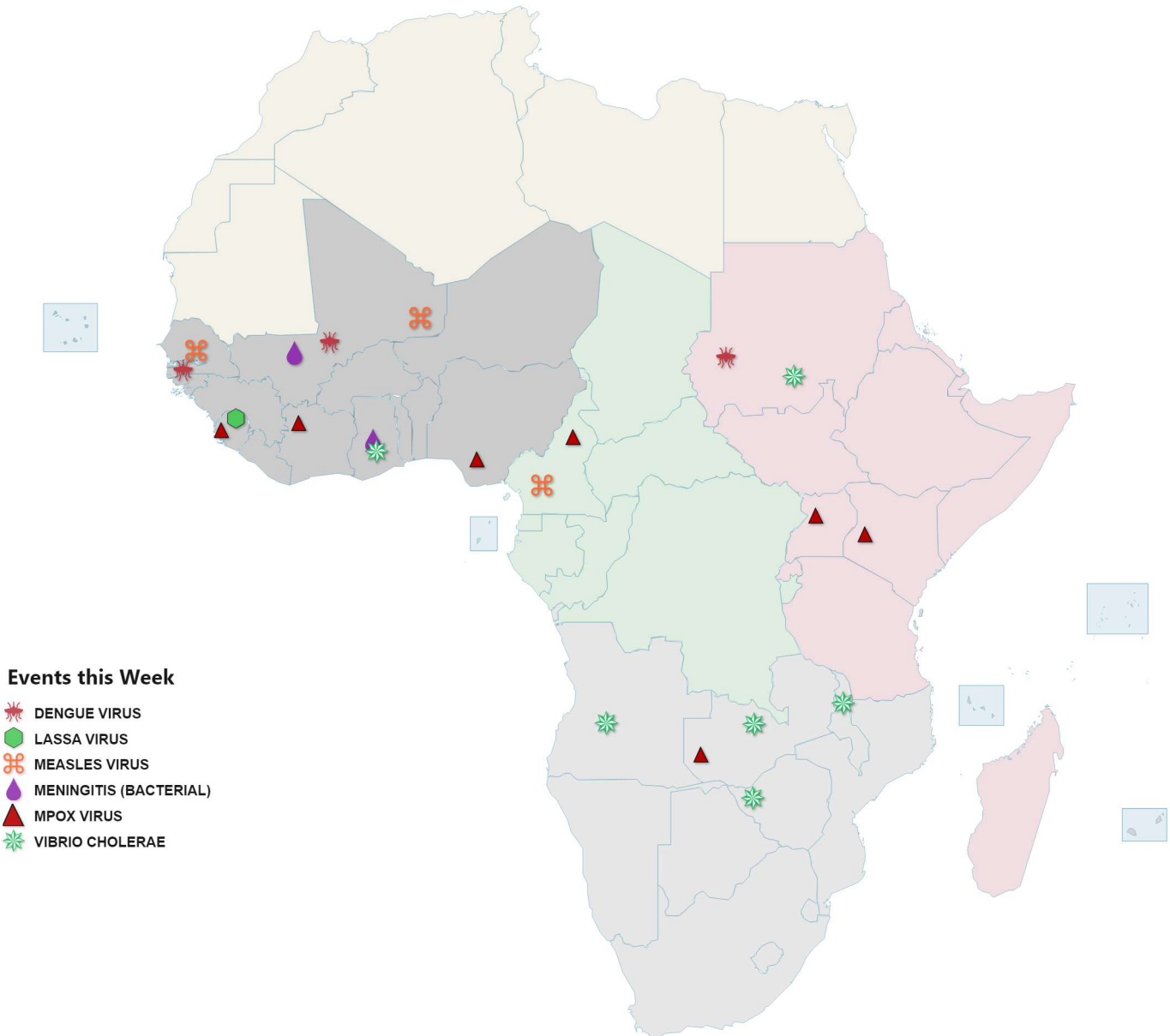
23

Events highlighted  
this week

22

New events since  
last issue

2







\*  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	5 (1)	17 (1)
Animal	0	0	0
Environment	0	0	0

# Event Summary

## New events since last issue

Agent/Syndrome	Country	Risk:Human	Risk:Animal	Type	Suspected	Probable	Confirmed	Deaths
 Lassa virus	Sierra Leone	High	N/A		0	0	1	1
 Meningitis (Bacterial)	Ghana	Moderate	N/A		20	0	9	10

## 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		592 (94)	0 (0)	117 (28)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	20 (4)	0 (0)
	Sudan	Moderate	N/A		715 (3)	0 (0)	0 (0)	1 (0)
 Measles virus	Cameroon	Moderate	N/A		83 (0)	0 (0)	51 (27)	8 (0)
	Mali	Moderate	N/A		32 (8)	0 (0)	18 (12)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	25 (6)	0 (0)
 Meningitis (Bacterial)	Mali	Moderate	N/A		48 (0)	0 (0)	13 (2)	0 (0)
 Mpox virus	Cameroon	High	N/A		17 (3)	0 (0)	0 (0)	0 (0)
	Côte d'Ivoire	Moderate	N/A		90 (82)	0 (0)	3 (1)	0 (0)
	Kenya	Moderate	N/A		27 (21)	0 (0)	7 (1)	0 (0)
	Nigeria	High	N/A		281 (66)	0 (0)	53 (25)	1 (1)
	Sierra Leone	High	Low		118 (7)	0 (0)	20 (0)	0 (0)
	Uganda	Moderate	N/A		1,318 (192)	0 (0)	1,318 (192)	13 (3)
	Zambia	Moderate	N/A		220 (19)	0 (0)	16 (2)	0 (0)
 Vibrio cholerae	Angola	Moderate	N/A		2,630 (1,276)	0 (0)	517 (161)	108 (49)
	Ghana	Moderate	N/A		1,271 (182)	43 (0)	165 (12)	9 (1)
	Malawi	Moderate	N/A		0 (0)	0 (0)	83 (3)	2 (0)
	Sudan	High	N/A		2,437 (135)	0 (0)	0 (0)	53 (6)
	Zambia	Moderate	N/A		216 (93)	0 (0)	8 (0)	9 (1)
	Zimbabwe	Moderate	N/A		88 (11)	0 (0)	45 (14)	2 (0)

## High Risk Events

## Lassa fever in Africa

**362** confirmed human case(s)  
**1,567** suspected human case(s)  
**72** human deaths (**CFR: 19.89%**)

Agent/Pathogen	Lassa virus	First Reported	1-Jan-2025	Previous Report Update	7-Feb-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	4 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	HIGH
Animal Risk Assessment	N/A				

## Description:

Since the beginning of 2025, a total of 1,929 cases (362 confirmed; 1,567 suspected) and 72 deaths [Case fatality rate (CFR: 19.89%)] of Lassa fever have been reported from four African Union (AU) Member States (MS): Guinea\* (4 cases; 1 deaths), Liberia (14; 0), Nigeria\*\* (1,910; 70), and Sierra Leone (1; 1).

In epidemiological week 6, one fatal case was reported from Sierra Leone.

**Sierra Leone (Initial report):** On 10 February 2025, the Ministry of Health (MoH) reported an outbreak of Lassa fever following the confirmation of a fatal case in Koinadugu District, Northern Province. The case was a 12-year-old male pupil who initially presented at the Mongo Bendugu Community Health Center with symptoms of fever, vomiting, diarrhea, muscle pain, headache, abdominal pain and distension, difficulty breathing, and unexplained bleeding from the mouth and nostrils. He was promptly referred to Kabala Government Hospital, where he was admitted to the pediatric ward and attended to by clinicians and nurses. He succumbed to the illness within 24 hours of admission. A blood sample was collected and sent to the Kenema Laboratory, where polymerase chain reaction (PCR) testing confirmed Lassa fever.

Lassa fever is a zoonotic, acute viral illness endemic to parts of West Africa, where its primary reservoir, the multimammate rat (*Mastomys natalensis*), is widely distributed. Human infection typically occurs through ingestion or inhalation of the virus, which is shed in the urine and droppings of infected *Mastomys* rodents. Nosocomial transmission can also occur in healthcare settings with inadequate infection prevention and control measures. Symptoms of Lassa fever commonly include fever, general malaise, headache, and signs of hemorrhage. While the overall fatality rate is approximately 1%, mortality among hospitalized patients is significantly higher, ranging between 15 and 20%.

In 2023, Sierra Leone reported six cases of Lassa fever (2 confirmed; 4 suspected) in Bo District, resulting in two deaths (Case fatality rate [CFR]: 100%).

**Note:** In 2024, a total of 11,712 cases (1,313 confirmed; 10,201 suspected) and 227 deaths (CFR: 19.1% ) of Lassa fever have been reported from three AU MS: Guinea (27 cases; 2 deaths), Liberia (278; 11), and Nigeria (11,407; 214).

**\*Between epidemiological week 1 and 3, four cases (1 confirmed; 3 suspected) and one death of Lassa fever were reported from two regions in Guinea.**

**\*\*In epidemiological week 5, the Nigeria Center for Disease Control and Preventions (NCDC) reported 441 new cases (68 confirmed; 373 suspected) and 17 new deaths (CFR:25%) of Lassa fever from seven states in Nigeria.**

## Response by MS/partner/Africa CDC:

The MoH has deployed a rapid response team to conduct a detailed case investigation and initiate risk communication in the affected area. Additionally, a total of 33 contacts have been identified for follow-up and disinfection of the pediatric ward has been conducted.

## Moderate Risk Events

### Mpox in Africa

**4,031** confirmed human case(s), **13,386** suspected human case(s)  
**116** human deaths (**CFR: 0.87%**)

Agent/Pathogen	Mpox virus	First Reported	3-Jan-2025	Previous Report Update	7-Feb-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	15 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 13,386 cases of mpox, of which 4,031 were laboratory-confirmed, and 116 deaths (CFR: 0.87%) of mpox, with five deaths (CFR: 0.1%) among confirmed cases, have been reported from 15 AU MS: Burundi (413 confirmed cases; 0 death), Cameroon (0; 0), Central African Republic (CAR) (6; 0), Congo ( 2; 0 ), Cote d'Ivoire (3; 0), DRC (2,167; 102), Ghana (0; 0), Kenya (7; 0), Liberia (5; 0), Nigeria (53; 1), Sierra Leone (20; 0), South Sudan (1; 0), Rwanda\* (20; 0), Uganda (1,318; 13), and Zambia (16; 0).

In epidemiological week 6, a total of 389 new cases of which, 221 were laboratory-confirmed, and four new deaths of mpox were reported from seven AU MS: Cameroon, Cote d'Ivoire, Kenya, Nigeria, Sierra Leone, Uganda, and Zambia.

**Cameroon\*\*:** In Epidemiological week 6, the MoH reported two cases of mpox and no deaths. Since the beginning of this year, 17 suspected cases, of which non was laboratory-confirmed, and no deaths of mpox have been reported from 5 regions. This outbreak started in February 2024. Cumulatively, since the start of the outbreak, 167 cases (9 confirmed, 158 suspected) and two deaths (CFR: 22.2%) of mpox were reported from nine of the ten regions in Cameroon. Children <15 years accounted for 22.2% of the confirmed cases and 77.8% of the confirmed cases were males. The clade II strain was isolated from sequenced confirmed cases. In comparison to epidemiological week 1 to 6 of 2024, a total of 9 cases (1 confirmed, 8 suspected) and one death of mpox were reported in Cameroon, which is a 89% increase in the number of suspected cases reported in the same period.

**Cote d'Ivoire\*\*\*:** Since the last update (31 January 2024), the MoH reported 82 new cases, of which one was laboratory confirmed, and no new deaths of mpox. Since the beginning of this year, 90 cases, of which three were laboratory confirmed, and no deaths of mpox were reported in Cote d'Ivoire. This outbreak started in October 2024. Cumulatively, 595 cases, of which 110 were laboratory-confirmed, and one death (CFR: 0.9%) of mpox have been reported from 35 of 48 health districts in Cote d'Ivoire. Of the confirmed cases, children <15 years accounted for 39% and males accounted for 65%. The clade IIa and clade IIb were isolated from the confirmed cases.

**Kenya:** Since the last update (31 January 2025), the MoH reported one new laboratory-confirmed cases and no new deaths of mpox from Taita Taveta, Makueni and Kericho counties. Since the beginning of this year, seven laboratory-confirmed, and no deaths of mpox have been reported from two of the forty seven counties in Kenya. This outbreak started in July 2024. Cumulatively, 38 laboratory-confirmed cases and one death (CFR: 2.6%) of mpox have been reported from 12 of 47 counties in Kenya. A total of 412 cases were tested resulting in a 100% testing rate. The clade IIb was isolated from 17 sequenced samples.

**Nigeria:** Since the last update (7 February 2025), the Nigeria Centre for Disease Control reported 66 new cases, of which 25 were laboratory-confirmed, and one new death (CFR: 4%) of mpox from 13 states. This is a 59% average increase in the number of confirmed cases in the last four weeks. Since the beginning of this year, 281 cases, of which 53 were laboratory-confirmed, and one death (CFR: 1.9%) of mpox have been reported from 24 of the 36 states and the federal capital territory. Nigeria is endemic for mpox and cases have been reported since 2017. Cumulatively 6,045 cases, of which 1,289 were laboratory-confirmed, and 17 deaths (CFR: 1.3%) of mpox have been reported from 34 of 36 states and the federal capital territory in Nigeria. Clade IIb was isolated from the confirmed cases.

**Sierra Leone:** Since the last update (7 February 2025), the MoH reported seven new es, of which non were laboratory-confirmed, and no new deaths of mpox from three districts. This outbreak started in January 2025. Cumulatively, 118 cases, of which 20 were laboratory-confirmed, and no deaths of mpox have been reported from eight of the sixteen districts in Sierra Leone. Clade IIb was isolated from two sequenced samples.



**Uganda:** Since the last update (7 February 2025), the MoH reported 192 new laboratory-confirmed cases and three new deaths (CFR: 1.6%) of mpox from multiple districts. This is a 6% average decrease in the number of new cases in the past four weeks. Since the beginning of this year, 1,318 laboratory-confirmed cases and 13 deaths (CFR: 0.8%) of mpox were reported. This outbreak started in July 2024. Cumulatively, 2,671 laboratory-confirmed cases and 19 deaths (CFR: 0.7%) of mpox have been reported from 84 of 146 districts in Uganda. A total of 3,360 cases were tested resulting in a 100% testing rate. Clade Ib was isolated from all sequenced samples.

**Zambia\*\*\*\* :** Since the last update (31 January 2025), the MoH reported 19 new cases, of which two were laboratory-confirmed, and no new deaths of mpox from three provinces. Since the beginning of this year, 220 cases, of which 16 were laboratory-confirmed, and no death of mpox were reported. This outbreak started in October 2024. Cumulatively, 223 cases, of which 19 were laboratory-confirmed, and no deaths of mpox have been reported from four of ten provinces in Zambia. A total of 223 cases were tested resulting in a 100% testing rate and an 8.5% positivity rate. Clade Ib was isolated from sequenced samples.

**Note:** In 2024, a total of 77,767 cases of mpox, of which 16,764 were laboratory-confirmed, and 1,288 deaths (CFR: 1.78%) of mpox have been reported from 20 AU MS: Angola (4 laboratory-confirmed cases; 0 deaths), Burundi (2,861; 1), Cameroon (9; 2), Central Africa Republic (CAR) (88; 3), Congo (23; 0), Cote d'Ivoire (107; 1), Democratic Republic of Congo (DRC) (11,503; 1,271), Gabon (2; 0), Ghana (5; 0), Guinea (3; 0), Liberia (63; 0), Kenya (31; 1), Mauritius (1; 0), Morocco (2; 0), Nigeria (184; 0), Rwanda (59; 0), South Africa (25; 3), Uganda (1,353; 6), Zambia (3; 0), and Zimbabwe (2; 0).

**\*The number of laboratory-confirmed cases reported in epidemiological week 3 from Rwanda was revised from ninety-four to four, following data harmonization. In addition, in epidemiological week 5, a backlog of 111 cases, of which three were laboratory-confirmed, were reported from Rwanda.**

**\*\*In epidemiological week 5, a backlog of one suspected case was reported from Cameroon. Additionally, 14 cases were included in the total case count but not in the narrative.**

**\*\*\*Cases of mpox in Cote d'Ivoire a from a batch report.**

**\*\*\*\*In epidemiological week 5 week, 13 cases of mpox from Zambia, of which five were laboratory-confirmed, were included in the total case count but not in the narrative.**

**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 communities. Additionally, mpox vaccination campaigns are currently ongoing in Rwanda, DRC, CAR, and Nigeria.

# Cholera in Africa

**829** confirmed human case(s), **43** probable human case(s), **17,278** suspected human case(s)  
**456** human deaths (**CFR: 2.51%**)

Agent/Pathogen	Vibrio cholerae	First Reported	3-Jan-2025	Previous Report Update	7-Feb-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	8 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 18,150 cases (829 confirmed; 43 probable; 17,278 suspected) and 456 deaths (CFR: 2.51%) of cholera have been reported from eight AU MS: Angola (3,147 cases ; 108 deaths), Ghana (1,479; 9), Malawi (83; 2), South Sudan (10,560; 272), Sudan (2,437; 53), Uganda (87; 1), Zambia (224; 9), and Zimbabwe (133; 2).

In epidemiological week 6, a total of 1,887 cases and 57 deaths of cholera were reported from six AU MS: Angola, Ghana, Malawi, Sudan, Zambia, and Zimbabwe.

**Angola:** Since the last update (7 February 2025), the MoH reported 1,437 new cases (161 confirmed; 1,276 suspected) and 49 new deaths (CFR: 3.4%) of cholera from eight provinces. This is a 65% average decrease in the number of new cases in the past four weeks. Cumulatively, 3,147 cases (517 confirmed; 2,630 suspected) and 108 deaths (CFR: 7.5%) of cholera have been reported from 10 of 17 provinces in Angola. Males accounted for 56% of all cases and 71% of all deaths. Additionally, children under 15 years accounted for 39% of all cases and 32% of all deaths.

**Ghana:** Since the last update (7 February 2025), the Ghana Health Services reported 194 new cases (12 confirmed; 0 probable; 182 suspected) and one new death (CFR: 0.5%) of cholera from five regions. This is an 8% average decrease in the number of new cases in the past four weeks. Since the beginning of this year, 1,479 cases and nine deaths (CFR: 0.6%) of cholera were reported from Ghana. This outbreak started in August 2024. Cumulatively, 7,132 cases (524 confirmed; 719 probable; 5,889 suspected) and 46 deaths (CFR: 0.6%) of cholera have been reported from five of sixteen regions in Ghana: Ashanti (5 confirmed cases; 0 probable; 86 suspected), Central (189; 0; 2,083), Eastern (2; 3; 33), Greater Accra (200; 330; 1,453), and Western (128; 386; 2,234) regions.

**Malawi:** Since the last update (7 February 2025), the MoH reported three new confirmed cases and no new deaths of cholera from three districts. This is a 6% average increase in the number of new cases in the last four weeks. Since the beginning of this year, 83 confirmed cases and two deaths (CFR: 2.5%) of cholera have been reported. This outbreak started in August 2024. Cumulatively, 298 confirmed cases and 14 deaths (CFR: 4.7%) of cholera have been reported from five of twenty-nine districts in Malawi. In comparison to epidemiological week 1 to 6 of 2024, a total of 36 confirmed cases and two deaths (CFR: 5.5%) of cholera were reported in Malawi, which is a 2-fold increase in the number of cases and no change in the number of deaths in the same period.

**Sudan\* :** Since the last update (7 February 2025), the MoH reported 135 new suspected cases and six new deaths (CFR: 4.4%) of cholera from 12 states. This is an 18% average decrease in the number of new cases in the past four weeks. Since the beginning of this year, 2,437 suspected cases and 53 deaths (CFR: 2.1%) of cholera have been reported. This outbreak started in July 2024. Cumulatively, 53,036 cases (69 confirmed; 52,967 suspected) and 1,404 deaths (CFR: 2.6%) of cholera have been reported from 12 states in Sudan. The outbreak is occurring amid a sustained complex humanitarian crisis.

**Zambia:** Since the last update (7 February 2025), the MoH reported 93 new suspected cases and one new death (CFR: 1.1%) of cholera from three provinces. This is a 48% increase in the number of cases reported compared to the last update. Since the beginning of this year, 224 cases (8 confirmed; 216 suspected) and nine deaths (CFR: 4.0%) of cholera have been reported. This outbreak started in December 2024. Cumulatively, 237 cases (15 confirmed cases; 222 suspected) and nine deaths (CFR: 6.2%) of cholera have been reported from three of ten provinces in Zambia. In comparison to epidemiological week 1 to 6 of 2024, a total of 14,780 cases and 513 deaths (CFR: 3.5%) of cholera were reported in Zambia, which is a 99% decrease in the number of cases and a 98% decrease in the number of deaths reported in the same period.

**Zimbabwe:** Since the last update (7 February 2025), the MoH reported 25 new cases (14 confirmed, 11 suspected) and no new deaths of cholera from Mashonaland Central province. This is an 18% average increase in the number of cases in the past four weeks. Since the beginning of this year, 133 cases (45 confirmed; 88 suspected) and two deaths (CFR: 1.9%) of cholera have been reported. This outbreak started in November 2024. Cumulatively, 365 cases (50 confirmed; 315 suspected) and four deaths (CFR: 1.2%) of cholera have been reported from four of ten provinces in Zimbabwe. In comparison to epidemiological week 1 to 6 of 2024, a total of 8,292 cases and 218 deaths (CFR: 2.6%) of cholera were reported in Zimbabwe, which is a 98% decrease in the number of cases and 99% decrease in deaths in the same period.

**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 have been 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; 359), Somalia (21,739; 138), South Africa (150; 1), South Sudan (13,858; 203), Sudan (52,896; 1,359), Tanzania (12,148; 145), Togo (604; 37), Uganda (58; 3), Zambia (20,076; 612), and Zimbabwe (19,646; 388).

**\*A backlog of 313 cases were reported from Sudan from epidemiological week 3 (49 cases) and epidemiological week 4 (264)**

#### Response by MS/partner/Africa CDC:

The ministries of health of the affected MS activated the emergence operation centers and deployed one health rapid response teams to conduct enhance surveillance, risk communication, and environmental sanitation in the affected communities.

## Dengue fever in Africa

**272** confirmed human case(s), **156** probable human case(s), **2,217** suspected human case(s)  
**1** human deaths (**CFR: 0.04%**)

Agent/Pathogen	Dengue virus	First Reported	1-Jan-2025	Previous Report Update	7-Feb-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	5 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 2,645 (272 confirmed; 156 probable; 2,217 suspected) and one death (CFR: 0.05%) of dengue fever have been reported from five AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Mali (709; 0), Senegal (20; 0), and Sudan (715; 1).

In epidemiological week 6, a total of 129 new cases and no new deaths of dengue fever were reported from three AU MS: Mali, Senegal, and Sudan.

**Mali\*:** Since last update (31 January 2025), the MoH reported 122 new cases (28 confirmed; 94 suspected) and no new deaths of dengue fever from Bamako region. Since the beginning of this year, 709 cases and no deaths of dengue fever were reported in Mali. This outbreak started in September 2023. Cumulatively, a total of 15,701 cases (1,625 confirmed; 14,076 suspected) and 74 deaths (CFR: 4.8%) of dengue fever have been reported from all 11 regions in Mali.

**Senegal:** Since the last update (7 February 2025), the MoH reported four new confirmed cases and no deaths of dengue fever from three districts. This is a 43% decrease in the number of new cases compared to the last update. Cumulatively, 20 confirmed cases and no deaths of dengue fever has been reported from seven of the 47 districts in Senegal. Of the confirmed cases, females accounted for 55% and persons aged 15 years and above accounted for 75%. Senegal is endemic for dengue fever and cases are reported all year round. This outbreak started in February 2024. Cumulatively, 922 confirmed cases and no deaths of dengue fever have been reported from 28 of 47 districts in Senegal.

**Sudan\*\*:** Since the last update (7 February 2025), the MoH reported three new suspected cases and no new deaths of dengue fever from multiple states. This is a 28% average decrease in the number of new cases in the past four weeks. Since the beginning of this year, 715 cases and one death (CFR: 0.1%) of dengue fever have been reported from eight of twelve states in Sudan. This outbreak started in July 2024. Cumulatively, 9,398 suspected cases and 16 deaths (CFR: 0.2%) of dengue fever have been reported from eight of twelve states in 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 have been 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), Cote 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).

**\*In epidemiological week 5, the MoH reported 231 new cases (41 confirmed; 190 suspected) and no new deaths of dengue fever from Mali.**

**\*\*A backlog of 106 cases of dengue fever were reported from Sudan from epidemiological week 5**

### 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

**2,703** confirmed human case(s), **12,255** suspected human case(s)  
**39** human deaths (**CFR: 0.26%**)

Agent/Pathogen	Measles virus	First Reported	8-Jan-2025	Previous Report Update	7-Feb-2025
First Occurred	30-Dec-2024	Country	Multiple Countries	Location	7 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 14,958 cases (2,703 confirmed; 12,255 suspected) and 39 deaths (CFR: 0.26%) of measles have been reported from six AU MS: Cameroon (134 cases ; 8 deaths)\*, Mali (50; 0), Morocco (13,888; 26), Senegal (25; 0), Somalia\* (784; 4), and Uganda (77; 1).

In epidemiological week 6, a total of 53 cases and no deaths of measles were reported from three AU MS: Cameroon, Mali, and Senegal.

**Cameroon\*\*:** Since the last update (7 February 2025), the MoH reported 27 new confirmed cases and no deaths of measles from ten regions. This is a 23% decrease in the number of new confirmed cases compared to the last update since the beginning of this year, 134 new cases (51 confirmed; 83 suspected) and eight deaths (CFR: 6.0%) of measles have been reported from all 10 regions. The outbreak is active in nine health districts in five regions. Of the total reported confirmed cases, 47.1% were unvaccinated and children under five years accounted for 51%. In 2023, the national measles vaccination coverage among children <2 years in Cameroon was 56%.

**Mali\*\*\*:** Since the last update (31 January 2025) the MoH reported 20 new cases (12 confirmed; 8 suspected) and no new deaths of measles from three districts: Since the beginning of this year, 50 cases (18 confirmed; 32 suspected) and no deaths of measles were reported from seven of seventy-five districts in Mali. This outbreak started in March 2024. Cumulatively, 731 cases (359 confirmed; 372 suspected) and no deaths of measles have been reported from all 11 regions. In 2022, the national measles vaccination coverage among children <1 year in Mali was 99%.

**Senegal:** Since the last update (7 February 2025), the MoH reported six new confirmed cases and no new deaths of measles from four districts. This is a 14% decrease in the number of new confirmed cases compared to the last update. Since the beginning of this year, 25 confirmed cases and no deaths of measles have been reported from ten of forty-seven districts. Of the confirmed cases, females accounted for 60% and persons aged 15 years and above accounted for 68%. Eighty-four percent of the confirmed cases were not vaccinated against measles. Senegal is endemic for measles and cases are reported all year round. This current outbreak started in March 2024. Cumulatively, 509 confirmed cases and no deaths of measles have been reported from all 47 districts in Senegal. In 2022, the national measles vaccination coverage of children <5 years in Senegal was 66%.

**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)], Cote 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; 1 3), 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).

**\*In epidemiological week 5, a backlog of 156 cases (32 confirmed; 124 suspected) and one new death of measles were reported from Somalia**

**\*\*In epidemiological week 5, Cameroon reclassified the previously suspected cases as confirmed cases and reported 47 suspected as a backlog from epidemiological weeks 3 and 4.**

**\*\*\*In epidemiological week 5, the MoH reported 11 new cases (1 confirmed; 10 suspected) and no new deaths of measles from Mali.**

## 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

**22** confirmed human case(s), **115** suspected human case(s)  
**17** human deaths (**CFR: 12.41%**)

Agent/Pathogen	Meningitis (Bacterial)	First Reported	3-Jan-2025	Previous Report Update	7-Feb-2025
First Occurred	3-Jan-2025	Country	Multiple Countries	Location	3 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 137 cases (22 confirmed; 115 suspected) and 17 deaths (CFR: 12.41%) of bacterial meningitis have been reported from three AU MS: Ghana (29 cases; 10 deaths), Mali (61; 0), and Togo (47; 7).

In epidemiological week 6, 31 new cases and 10 new deaths of bacterial meningitis were reported from Ghana and Mali.

**Ghana (Initial report):** On 31 January 2025, the Ghana Health Services reported an outbreak of bacterial meningitis with 29 cases (9 confirmed; 20 suspected) and 10 deaths (CFR: 34.5 %) from six of eleven districts in Upper West region of Ghana. Twenty-four cerebrospinal fluid samples were collected and tested using PCR at the reference laboratory located at the Upper West regional hospital. Nine of the samples were confirmed positive for bacterial meningitis. *Streptococcus Pneumoniae* was isolated from eight of the samples while one sample had both *Neisseria meningitis* and *Streptococcus Pneumoniae*. In 2024, eighteen cases and four deaths (CFR: 22.2%) of bacterial meningitis were reported from the Upper West region of Ghana.

**Mali\*:** Since the last update (31 January 2025), the MoH reported two new confirmed cases and no new deaths of bacterial meningitis from the Kati (1) and Commune I (1) districts of Bamako. Cumulatively, 61 cases (13 confirmed; 48 suspected) and no deaths of bacterial meningitis have been reported from 10 of 75 districts in Mali this year. The bacteria isolated from the confirmed cases include; *Streptococcus pneumoniae* (isolated from 4 confirmed cases), *Neisseria meningitidis* (3), *Neisseria meningitidis W135* (2), *Haemophilus influenzae* (4). In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

Meningitis is an infection that causes inflammation of the meninges, the thin protective membranes surrounding the brain and spinal cord. It can be caused by bacteria, viruses, fungi, parasites, amoebas, or occur in non-infectious forms. The disease is transmitted through respiratory droplets from infected individuals. Common symptoms include fever, headache, and neck stiffness; though additional symptoms may vary depending on the underlying cause. Vaccines to prevent meningitis are widely available and are included in the routine immunization schedules of most Member States.

**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).

**\*In epidemiological week 5, the MoH reported 29 new suspected cases and no new deaths of bacterial meningitis from Mali.**

## Response by MS/partner/Africa CDC:

The ministries of health of the affected member states continue to conduct enhance surveillance, case management, as well as risk communication and community engagement activities in the affected districts

- Epidemiological week 6 covers the period of 3 - 9 February 2025.
- Mpox cases include all persons who have presented with symptoms consistent with the suspected case definition for mpox.
- 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.