

Africa CDC Epidemic Intelligence Report

Date of Issue: 28 Jul 2025

Active Events

146

New Events reported
in 2025

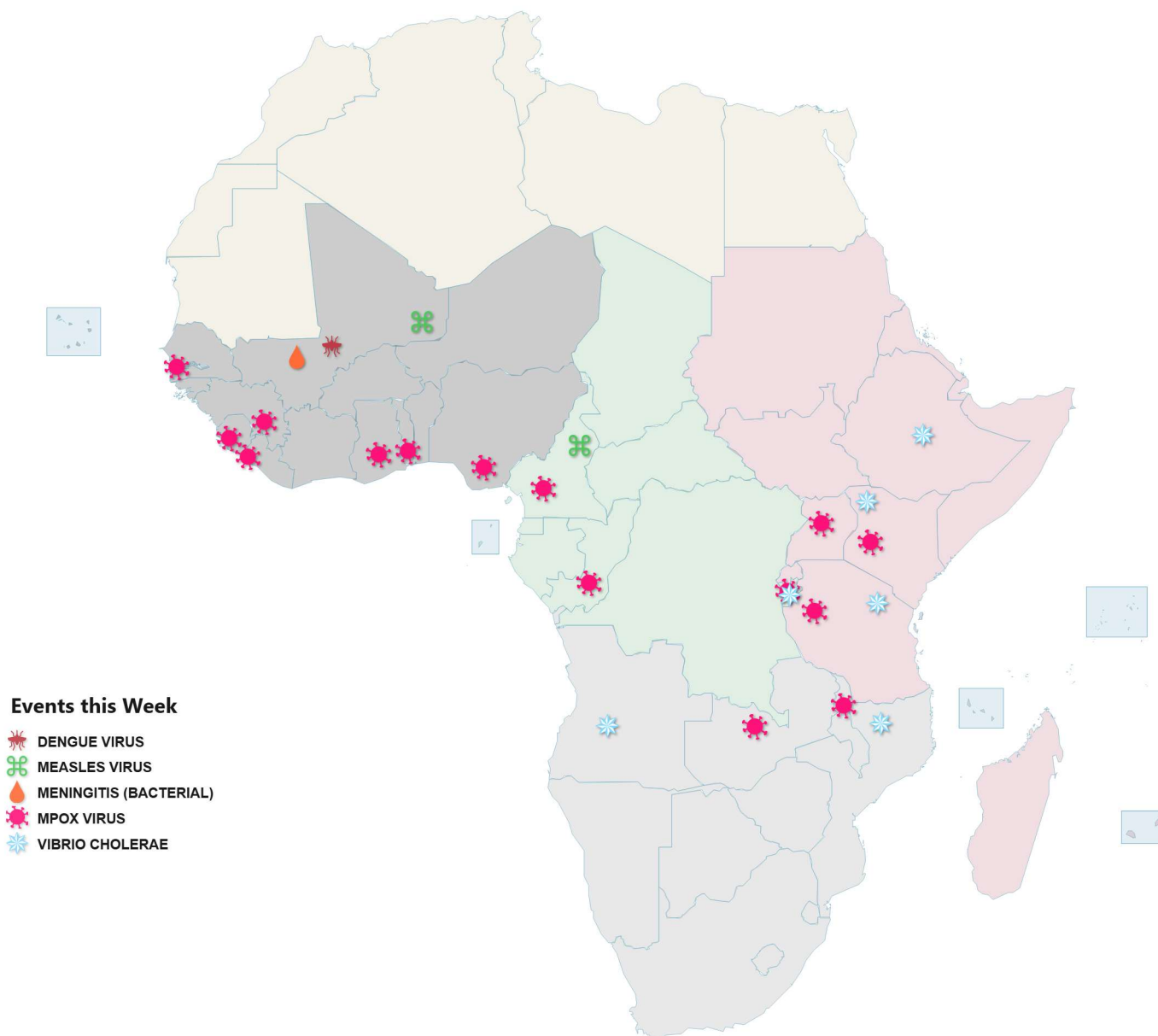
80

Events highlighted
this week

25

New events since
last issue

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	11 (1)	14
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
 Mpox virus	Gambia	High	N/A		0	0	1	0

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		1,763 (35)	0 (0)	436 (7)	0 (0)
 Measles virus	Cameroon	Moderate	N/A		502 (7)	0 (0)	1,602 (8)	2 (0)
	Mali	Moderate	N/A		372 (16)	0 (0)	138 (0)	0 (0)
 Meningitis (Bacterial)	Mali	Moderate	N/A		331 (1)	0 (0)	87 (3)	0 (0)
 Mpox virus	Burundi	High	N/A		3,598 (84)	0 (0)	1,247 (41)	0 (0)
	Cameroon	Moderate	N/A		47 (2)	0 (0)	3 (2)	0 (0)
	Congo Republic	High	N/A		148 (2)	0 (0)	62 (2)	0 (0)
	Ghana	Moderate	N/A		1,538 (130)	0 (0)	234 (37)	0 (0)
	Guinea	Moderate	N/A		423 (57)	0 (0)	271 (65)	0 (0)
	Kenya	Moderate	N/A		424 (13)	0 (0)	222 (13)	5 (1)
	Liberia	High	N/A		752 (108)	0 (0)	310 (38)	0 (0)
	Malawi	Moderate	N/A		23 (0)	0 (0)	59 (9)	0 (0)
	Nigeria	High	N/A		1,034 (11)	0 (0)	241 (5)	4 (0)
	Sierra Leone	High	Low		6,135 (219)	0 (0)	4,876 (145)	42 (7)
	Tanzania	High	N/A		402 (30)	0 (0)	100 (7)	0 (0)
	Togo	Moderate	N/A		234 (19)	0 (0)	50 (2)	0 (0)
	Uganda	Moderate	N/A		11,091 (146)	0 (0)	6,254 (70)	37 (0)
	Zambia	Moderate	N/A		705 (82)	0 (0)	176 (24)	3 (0)
	Angola	Moderate	N/A		27,566 (102)	0 (0)	937 (0)	769 (5)
 Vibrio cholerae	Burundi	Moderate	N/A		0 (0)	0 (0)	408 (25)	0 (0)
	Ethiopia	High	N/A		5,643 (26)	0 (0)	0 (0)	48 (0)
	Kenya	High	N/A		377 (2)	0 (0)	48 (0)	20 (0)
	Mozambique	High	N/A		0 (0)	0 (0)	4,117 (83)	43 (0)
	Tanzania	High	N/A		3,892 (27)	0 (0)	0 (0)	40 (1)

Moderate Risk Events

Mpox in Africa

28,048 confirmed human case(s), **89,566** suspected human case(s)
554 human deaths (**CFR: 0.62%**)

Agent/Pathogen	Mpox virus	First Reported	3-Jan-2025	Previous Report Update	18-Jul-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	25 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 89,566 mpox cases of which 28,048 (31.32%) laboratory-confirmed have been reported from 25 African Union Member States (AU MS). In addition, a total of 554 deaths [case fatality rate (CFR: 0.62%)] among suspected cases and 186 deaths (CFR: 0.66%) among confirmed cases have been reported from eight countries in Africa. The distribution of laboratory-confirmed cases and deaths by MS is as follows: Angola (4 confirmed cases; 0 deaths), Burundi (1,247; 0), Cameroon (3;0), Central African Republic (CAR) (16; 0), Congo (62; 1), Côte d'Ivoire (23; 0), Democratic Republic of Congo (DRC) (13,795; 644), Ethiopia (26;1), Gambia (1; 0), Ghana (234; 0), Guinea (271; 1), Kenya (222; 5), Liberia (310; 0), Malawi (59; 0), Morocco (2; 0), Mozambique (13; 0), Nigeria (241; 4), Rwanda** (40; 0), Sierra Leone (4,876; 42), South Africa (6; 0), South Sudan (17; 0), Tanzania (100; 0), Togo (50; 0), Uganda** (6,254; 39), and Zambia (176; 3).

In epidemiological week 29, 14 AU MS: Burundi, Cameroon, Congo Republic, Ghana, Guinea, Kenya, Liberia, Malawi, Nigeria, Sierra Leone, Tanzania, Togo, Uganda and Zambia reported a total of 1,360 new mpox cases, with 443 (32.57%) laboratory-confirmed, and eight new deaths among confirmed cases.

Burundi: Since the last update (18 July 2025) the Ministry of Health (MoH) reported 84 new cases, of which 41 were laboratory-confirmed and no new deaths of mpox from 40 health districts. This is a 26% average increase in the number of confirmed cases reported in the last four weeks. This year, 3,598 cases, of which 1,247 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, 9,389 cases, of which 4,193 were laboratory confirmed and one death (CFR: 0.02%) of mpox have been reported from 46 of 49 health districts in Burundi.

Cameroon: Since the last update (18 July 2025), the Cameroon MoH reported two new laboratory-confirmed cases of mpox, and no new deaths from Ayos Health District, Central Region of Cameroon. The cases are contacts of the confirmed index case. This year, 47 suspected cases of which three were laboratory-confirmed and no deaths of mpox have been reported from eight regions in Cameroon. In 2024, Cameroon reported 150 suspected mpox cases, including nine laboratory-confirmed cases and two deaths (CFR: 22.2%) among confirmed cases, across nine of the ten regions. Children <15 years accounted for 22.2% of confirmed cases, while 77.8% were males. The last confirmed case was reported in epidemiological week 47, and the mpox incident management system (IMS) was deactivated in December 2024.

Congo Republic: Since the last update (11 July 2025), the MoH reported two new cases, both laboratory-confirmed, with no new deaths of mpox from two departments. Since the beginning of this year, 148 cases, of which 62 were laboratory-confirmed, and one death (CFR: 0.61%) of mpox were reported from six of twelve departments in Congo Republic. This outbreak started in January 2024. Cumulatively, 433 cases, of which 86 were laboratory-confirmed, and one death (CFR: 1.16%) of mpox have been reported from six of twelve departments in Congo republic.

Ghana: Since the last update (18 July 2025), the Ghana Health Services reported 130 cases of which 37 were laboratory-confirmed and no deaths of mpox from all 16 regions. This represents an 87% average increase in the number of confirmed cases in the last four weeks. This year, 1,538 cases of which 234 were laboratory-confirmed, and no deaths of mpox were reported from all 16 regions in Ghana. Since the start of the outbreak in October 2024, a cumulative of 1,966 cases, of which 237 were laboratory-confirmed, and no deaths of mpox have been reported from all 16 regions in Ghana. Clade II was isolated from sequenced samples.

Guinea: Since the last update (18 July 2025), the MoH reported 65 new laboratory-confirmed and no new deaths of mpox from multiple locations. This represents a 275% average increase in the number of confirmed cases in the last four weeks. This year, 423 cases of which 271 were laboratory-confirmed and no deaths of mpox have been reported from Guinea. Since the start of this outbreak (March 2024), a cumulative of 533 cases, of which 273 were laboratory-confirmed, and no deaths of mpox have been reported in Guinea. Clade IIb mpox was isolated from confirmed cases.

Kenya: Since the last update (18 July 2025), the MoH reported 13 new laboratory-confirmed and one new death (CFR: 7.69%) of mpox from multiple districts. This is a 10% average increase in the number of confirmed cases in the past four weeks. This year, 222 laboratory-confirmed and five deaths (CFR: 2.25%) of mpox were reported from 21 of 47 counties in Kenya. This outbreak started in July 2024. Cumulatively, 253 laboratory-confirmed and six deaths (CFR: 2.37%) of mpox have been reported from 21 of 47 counties in Kenya. A total of 779 samples were tested resulting in a 100% testing rate and 32.48% positivity rate. Clade Ib was isolated from 33 sequenced samples.

Liberia: Since the last update (18 July 2025), the MoH reported 108 new cases of which 38 were laboratory-confirmed, and no new deaths of mpox from multiple counties. This is a 57% average increase in the number of confirmed cases in the last four weeks. This year, 752 cases of which 310 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 1,163 cases, of which 373 were laboratory-confirmed, and no deaths of mpox have been reported from all 15 counties in Liberia. Clade IIb was isolated from sequenced samples.

Malawi*: Since the last update (18 July 2025), the MoH reported nine new laboratory-confirmed cases and no new deaths of mpox in Malawi. Since the beginning of this year, 294 cases of which 59 laboratory-confirmed cases and no deaths of mpox have been reported from nine of twenty-eight health districts in Malawi; Lilongwe (46 confirmed cases), Mangochi (3), Salima (2), Ntcheu (1), Nkhatabay (1), Blantyre (3), Likoma(1),Mzimba South (1) and Ntchisi (1). Thirty-six (61%) of the confirmed cases were males within the ages of 2 to 75 years.

Nigeria: Since the last update (18 July 2025), the Nigeria Center for Disease Control (NCDC) reported 11 new cases, of which five were laboratory-confirmed, and no new deaths of mpox from five states. This is a 26% average increase in the number of confirmed cases in the last four weeks. This year, 1,034 cases, of which 241 were laboratory-confirmed, and four deaths (CFR: 1.65%) 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 6,798 cases, of which 1,516 were laboratory-confirmed, and 21 deaths (CFR: 1.39%) of mpox have been reported from all 36 states and the federal capital territory in Nigeria. Clade IIb was isolated from the sequenced samples.

Sierra Leone: Since the last update (18 July 2025), the MoH reported 219 new cases, of which 145 were laboratory-confirmed, and seven new deaths (CFR: 4.83%) of mpox from multiple districts. This is a 5% average decrease in the number of new cases in the last four weeks. Since the start of the outbreak in January 2025, a cumulative of 6,135 cases, of which 4,876 were laboratory-confirmed, and 42 deaths (CFR: 0.86%) of mpox have been reported from all the 16 districts in Sierra Leone. Of the confirmed cases, children <15 years accounted for 5% and 52% were males. Clade IIb was isolated from sequenced samples.

Tanzania: Since the last update (18 July 2025), the MoH has reported seven new laboratory-confirmed cases and no deaths of mpox from Tanzania mainland and Zanzibar. This is a 7% average increase in the number of confirmed cases in the last four weeks. Since the start of the outbreak in March 2025, a cumulative of 100 laboratory-confirmed, and no deaths of mpox have been reported from Tanzania mainland and Zanzibar. Clade Ib was isolated from sequenced samples.

Togo: Since the last update (18 July 2025) the MoH reported 19 new cases, of which two were laboratory confirmed and no new deaths of mpox from eight health districts. This is an 11% average increase in the number of confirmed cases in the last four weeks. Cumulatively, 234 cases, of which 50 were laboratory confirmed, and no deaths of mpox were reported from eight health districts in Togo. Of the confirmed cases, males accounted for 58% and 40% were aged 24 – 44 years.

Uganda*:** Since the last update (18 July 2025), the MoH reported 70 new laboratory-confirmed cases and no new deaths of mpox from multiple districts. This is an 8% average decrease in the number of confirmed cases in the past four weeks. This year, 6,254 laboratory-confirmed cases and 39 deaths (CFR: 0.62%) of mpox were reported in Uganda. This outbreak started in July 2024. Cumulatively, 7,582 laboratory-confirmed cases, and 46 deaths (CFR: 0.61%) of mpox have been reported from 120 of 146 districts in Uganda. A total of 15,590 cases were tested resulting in a 100% testing rate and 48.63% test positivity rate. Clade Ib was isolated from all sequenced samples.

Zambia: Since the last update (18 July 2025), the MoH reported 24 new cases which were laboratory-confirmed, and no deaths of mpox from six districts of five provinces. Since the beginning of this year, 705 suspected cases, of which 176 were laboratory-confirmed, and three deaths (CFR: 1.70%) of mpox were reported. This outbreak started in October 2024. Cumulatively, 836 suspected cases, of which 178 were laboratory-confirmed, and three deaths (CFR: 1.68%) of mpox have been reported from all ten provinces in Zambia. Clade Ib was isolated from sequenced samples.

In epidemiological week 30, a new mpox outbreak was reported in The Gambia involving 58 cases (1 confirmed; 57 suspected) and no deaths.

Gambia (*Initial report*): On 22 July 2025, the MoH of The Gambia declared an mpox outbreak following the confirmation of one case with no deaths. The case is a 26-year-old female from Kunkunjang Keitaya community, Kombo North District, Western Health Region. There was no travel history outside The Gambia in the 15 days prior to symptom onset. On 10 July, the case presented at Fajikunda Health Centre with symptoms including rash, swollen lymph nodes, headache, back pain, muscle aches, and mucosal lesions. Skin lesion samples tested positive for mpox by polymerase chain reaction (PCR) at The Gambia National Public Health Institute laboratory. Genomic sequencing conducted at Institut Pasteur in Dakar confirmed mpox clade II. This is the first mpox outbreak in The Gambia.

Footnote:

***Last week Africa CDC inadvertently reported 109,544 mpox cases instead of 82,270 cases. This has been corrected this week.**

****In epidemiological week 27, a backlog of 22 suspected cases of mpox were reported from Rwanda.**

*****Between epidemiological weeks 1 - 28, a backlog of 25 confirmed cases and 2 deaths of mpox were reported from Uganda.**

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

6,787 confirmed human case(s), **47** probable human case(s), **192,162** suspected human case(s)
4,118 human deaths (**CFR: 2.07%**)

Agent/Pathogen	Vibrio cholerae	First Reported	3-Jan-2025	Previous Report Update	18-Jul-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	21 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 198,996 cases (6,787 confirmed; 47 probable; 192,162 suspected) and 4,118 deaths (CFR: 2.07%) of cholera have been reported from 21 AU MS: Angola (27,566 cases; 769 deaths), Burundi* (408; 0), Comoros (40; 0), Côte d'Ivoire (109; 7), DRC (38,366; 1,007), Ethiopia** (5,643; 48), Ghana (2,780; 14), Kenya*** (425; 20), Malawi (91; 3), (Mozambique (4,117; 43), Namibia (17; 1), Nigeria (2,124; 68), Rwanda**** (303; 0), Somalia (5,950 ; 8), South Sudan***** (65,881; 1,132), Sudan***** (39,936; 921), Tanzania (3,892; 40), Togo (165; 4), Uganda (99; 1), Zambia (483; 9), and Zimbabwe (601; 23).

In epidemiological week 29, a total of 1,169 new cases and 46 new deaths (CFR: 3.93%) of cholera were reported from seven AU MS: Angola, Burundi, Ethiopia, Mozambique, South Sudan, Sudan, and Tanzania.

Angola: Since the last update (18 July 2025), the MoH reported 102 new suspected cases and five new deaths (CFR: 4.90%) of cholera from seven provinces. This is a 41% average decrease in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 27,566 cases (937 confirmed; 26,629 suspected) and 769 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 33% of all deaths. Additionally, 56% of all deaths occurred at the health facilities.

Burundi*: Since the last update (23 May 2025), the MoH reported 25 new suspected cases and no deaths of cholera from Bujumbura, Mairie and Cibitoke Provinces. This year, a total of 408 cases and no deaths of cholera have been reported from seven of eighteen provinces in Burundi. Males accounted for 55% and children <5 years accounted for 17.3% of all cases. Since the beginning of the outbreak (December 2022), a cumulative of 2,685 cases (2,676 confirmed; 9 suspected) and 12 deaths (CFR: 0.45%) of cholera have been reported from 14 of 18 provinces in Burundi. In comparison to the same period in 2024 (epidemiological week 1 to 29), a total of 703 confirmed cases and no deaths of cholera were reported in Burundi, which is a 42% decrease in the number of cases.

Ethiopia:** Since the last update (18 July 2025), the Ethiopia Public Health Institute reported 26 new suspected cases and no new deaths of cholera from four regions. This is a 36% average decrease in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 5,643 suspected cases and 48 deaths (CFR: 0.85%) of cholera have been reported from four of twelve regions in Ethiopia.

Mozambique: Since the last update (18 July 2025), the MoH reported 83 new confirmed cases and no deaths of cholera from Manica, Nampula, Sofala, Tete and Zambezia provinces. This is a 13% average increase in the number of new cases in the past four weeks. This year, 4,117 confirmed cases and 43 deaths (CFR: 1.04%) of cholera were reported from five of ten provinces in Mozambique. Since the beginning of the outbreak (October 2024), a cumulative of 4,420 confirmed and 64 deaths (CFR: 1.45%) of cholera have been reported from five of ten provinces in Mozambique. In comparison to the same period in 2024 (epidemiological week 1 to 29), a total of 8,162 confirmed cases and 17 deaths (CFR: 0.21%) of cholera were reported in Mozambique, which is a 50% decrease in the number of cases and a 2.5-fold increase in the number of deaths.

South Sudan***:** Since the last update (18 July 2025), the MoH reported 635 new cases (3 confirmed; 632 suspected) and 2 new deaths (CFR: 0.31%) of cholera from nine states. This is an 18% average decrease in the number of cases in the past four weeks. This year, 65,881 cases (326 confirmed; 65,555 suspected) and 1,132 deaths (CFR: 1.72%) of cholera were reported from nine of ten states in South Sudan. Since the beginning of this outbreak (September 2024), a cumulative of 80,329 cases and 1,439 deaths (CFR: 1.79%) of cholera have been reported from nine of ten states in South Sudan.

Sudan***:** Since the last update (18 July 2025), the MoH reported 271 new suspected cases and 38 new deaths (CFR: 14.02%) of cholera from 12 states. This is a 22% average decrease in the number of new cases in the past four weeks. This year, 39,936 suspected cases and 921 deaths (CFR: 2.31%) of cholera were reported from 12 states in Sudan. Since the beginning of this outbreak (July 2024), a cumulative of 89,831 cases and 2,280 deaths (CFR: 2.54%) of cholera have been reported from 12 states in Sudan. The outbreak is occurring amid a sustained complex humanitarian crisis.

Tanzania: Since the last update (18 July 2025), the MoH reported 27 new suspected cases and one new death (CFR: 3.70%) of cholera from Mbeya and Ruvuma regions. This is a 27-fold increase in the number of cases compared to the previous week. This year, 3,892 suspected cases and 4 deaths (CFR: 1.03%) of cholera were reported from seven of 31 regions in Tanzania. Since the beginning of this outbreak (September 2023), a cumulative of 16,040 cases and 185 deaths (CFR: 1.15%) of cholera have been reported from 23 of 31 regions in Tanzania.

Footnotes:

***Between epidemiological week 21 - 29, a backlog of 193 cholera cases and no deaths were reported from Burundi**

****In epidemiological week 28, a backlog of 4 cholera cases were reported from Ethiopia.**

*****In epidemiological week 28, a backlog of 2 cholera cases were reported from Kenya.**

******In epidemiological week 27, a backlog of 4 cholera cases (1 confirmed; 3 suspected) were reported from Rwanda.**

*******Between epidemiological weeks 6 - 28, a backlog of 1,569 cholera cases and 22 deaths were reported from South Sudan.**

*******Between epidemiological weeks 23 - 28, a backlog of 3,001 cholera cases 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:

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

Polio (vaccine-derived) in Africa

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

Agent/Pathogen	Polio virus (vaccine-derived)	First Reported	1-Jan-2025	Previous Report Update	18-Jul-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, 74 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported from seven AU MS: Angola (4 cases), Chad (13), Djibouti (1), Ethiopia (37), Niger (1), Nigeria (16) and Sudan (2). One confirmed case and no death of cVDPV3 was reported from Guinea (1; 0). However, no confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) have been reported from Africa.

In epidemiological week 29, two new confirmed cases of cVDPV2 were reported from Chad and Nigeria.

Chad: Since the last update (11 July 2025), the Global Polio Eradication Initiative (GPEI) reported one new confirmed case and no deaths of cVDPV2 from N'Djamena, with onsets of paralysis on 15 May 2025. Cumulatively, 13 confirmed cases of cVDPV2 have been reported from four of the twenty-three provinces and N'Djamena capital city in Chad this year. The last outbreak of cVDPV2 in Chad was in 2023 with 55 cases and the total number of cVDPV2 in Chad in 2024 was 39. In 2022, the national oral polio vaccination (OPV3) coverage among children <1 year in Chad was 88%.

Nigeria: Since the last update (29 May 2025), the GPEI reported one confirmed case and no deaths of cVDPV2 from Jigawa state. Cumulatively, 16 confirmed cases and no deaths of cVDPV2 have been reported from Nigeria. In 2023, the national OPV3 coverage among children <1 year in Nigeria was 84%.

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

1,175 confirmed human case(s), **156** probable human case(s), **7,935** suspected human case(s)
18 human deaths (CFR: **0.19%**)

Agent/Pathogen	Dengue virus	First Reported	1-Jan-2025	Previous Report Update	18-Jul-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 9,266 cases (1,175 confirmed; 156 probable; 7,935 suspected) and 18 deaths (CFR: 0.19%) of dengue fever have been reported from 10 AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,320; 1), Guinea (1; 0), Kenya (1; 0), Mali (2,199; 0), Mauritius (59; 0), Nigeria (178;11) Senegal (32; 0), and Sudan (4,275; 6).

In epidemiological week 29, a total of 42 new cases and no new deaths of dengue fever were reported from Mali.

Mali: Since the last update (18 July 2025), the MoH reported 42 new cases (7 confirmed; 35 suspected) and no new deaths of dengue fever from Bamako (41; 0), and Sikasso (1,0) regions. This is a 4% average decrease in the number of new cases in the past four weeks. This year, a total of 2,199 cases (436 confirmed; 1,763 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 17,291 cases (2,044 confirmed; 15,247 suspected) and 74 deaths (CFR: 0.43%) 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:

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

8,298 confirmed human case(s), **97,808** suspected human case(s)
756 human deaths (**CFR: 0.71%**)

Agent/Pathogen	Measles virus	First Reported	8-Jan-2025	Previous Report Update	18-Jul-2025
First Occurred	30-Dec-2024	Country	Multiple Countries	Location	18 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 106,106 cases (8,298 confirmed; 97,808 suspected) and 756 deaths (CFR: 0.71%) of measles have been reported from 18 AU MS: Cameroon (2,104 cases; 2 deaths), Chad (926; 1), DRC (38,840 cases; 611), Ethiopia (4,429; 22), Guinea (6,228; 6), Kenya (61; 0), Malawi (167; 0), Mali (510; 0), Mauritania (189; 0), Morocco (42,604; 92), Nigeria (739; 0), Rwanda (161; 0), Senegal (92; 0), Somalia (5,447; 14), South Africa (108; 0), Sudan (2,568; 7), Uganda (77; 1) and Zambia (856; 0).

In epidemiological week 29, a total of 31 new cases and no new deaths of measles were reported from two AU MS: Cameroon and Mali.

Cameroon: Since the last update (18 July 2025) the MoH reported 15 new cases (8 confirmed; 7 suspected) and no new deaths of measles from all 10 regions. This is a four-fold average increase in the number of confirmed cases in the last four weeks. Since the beginning of this year, 2,104 cases (1,602 confirmed; 502 suspected) and two deaths (CFR: 0.09%) of measles have been reported from all 10 regions in Cameroon. Of the confirmed cases, 65% 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 (18 July 2025), the MoH reported 16 new suspected cases and no new deaths of measles from five regions. This is a 23% average increase in the number of new cases in the last four weeks. This year, 510 cases (138 confirmed; 372 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 1,220 cases (483 confirmed; 737 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%.

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:

Response 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

148 confirmed human case(s), **839** suspected human case(s)
27 human deaths (**CFR: 2.74%**)

Agent/Pathogen	Meningitis (Bacterial)	First Reported	3-Jan-2025	Previous Report Update	18-Jul-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 987 cases (148 confirmed; 839 suspected) and 27 deaths (CFR: 2.74%) of bacterial meningitis have been reported from four AU MS: Ghana (439 cases; 20 deaths), Mali (418; 0), Togo (47; 7) and Zambia (83; 0).

In epidemiological week 29, a total of four new cases and no new deaths of bacterial meningitis were reported from Mali.

Mali: Since the last update (18 July 2025), the MoH reported four new cases (3 confirmed; 1 suspected) and no new deaths of bacterial meningitis from four regions. This is an 18% average decrease in the number of new cases in the last four weeks. Cumulatively, 418 cases (87 confirmed; 331 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* (33), *Neisseria meningitidis* W135 (24), *Haemophilus influenzae non-b* (20) and *Haemophilus influenzae b* (6) *Haemophilus influenzae non-b* (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 (3,306; 265)

Response by MS/partner/Africa CDC:

Mali: The MoH continues to conduct enhance surveillance, case management, Cerebro-Spinal Fluid sample collection, as well as risk communication and community engagement activities in the affected districts.

- Epidemiological week 29 covers the period from 14 to 20 July 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.
- 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.